

the fairgrounds was named the Murdoch Building upon his retirement. At his retirement luncheon, it was said of him that he was a "natural-born leader, dreamer and legend of our time"—a testament to his vision, dedication and commitment to community service.

Bob was a long-time member of the Texas Association of Fairs and Exposition. He served as secretary/treasurer of the Texas Association from 1954 to 1983 and received the Secretary of the Year Award from the national Federation of State and Provincial Association of Fairs.

Bob also was a leader in other community organizations. He served as chief executive director of the East Texas Agriculture Council and as executive secretary/treasurer of the East Texas Farm and Ranch Club, which he organized in 1952. He was the farm editor and broadcaster for radio station KTBB in Tyler from 1951 to 1960 and was a columnist and feature writer for the Tyler Morning Telegraph.

A Dallas native, he was born on December 18, 1918. He received a journalism degree from Hardin Simmons University in 1941 and fulfilled his military duties by serving four years in the Signal Corps and Army Air Corps during World War II. After being discharged, he managed Chambers of Commerce in Bowie and Gainesville.

He is survived by his wife, Jo Ann Murdoch of Tyler; two daughters, Janet Tomlin of Tyler and Dianne Cavazos and her husband, Hector, of Humble; one brother, Russell Murdoch of Dallas; one granddaughter, Melissa, and her husband, Scott Eeds, of Whitehouse; two grandsons, Lance and Evan Cavazos of Humble; and one greatgranddaughter, Emily Eeds, of Whitehouse.

Mr. Speaker, Bob Murdoch's contributions to his community will long be remembered—and he will be missed by his family and many friends in Tyler and Smith County. As we adjourn today, may we do so in celebration of this outstanding citizen from the Fourth District of Texas.

MIDWEST CLEAN AIR GASOLINE
RESERVE ACT JUNE 29, 2000

HON. JUDY BIGGERT

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 29, 2000

Mrs. BIGGERT. Mr. Speaker, I represent a suburban Chicago district and, as we all know, the Chicago area now faces the highest gas prices in the nation. This is not a distinction of which we are proud or happy.

Today, Governor Ryan of Illinois and the Illinois General Assembly took an important step to provide the residents of Illinois with some relief, and they should be commended for their swift action. In one day, the General Assembly passed and the Governor signed a law that suspends the Illinois gas tax for six months. They were forced to take the extraordinary action of sacrificing badly needed road improvement funds in order to give consumers at the pumps an extra ten or twenty cents per gallon relief.

We cannot allow residents of states like Illinois and Wisconsin to confront this situation

again in the future. The burden is just too great on individuals and small businesses in the region.

That's why I rise today to announce the introduction of a bill to help prevent future crises involving the price and supply of gasoline in the Midwest.

The Midwest Clean Air Gasoline Reserve Act would give the Secretary of Energy the authority to establish a Midwest reserve of reformulated gasoline or the petroleum products used to make reformulated gasoline. The President would release this stock of reformulated gasoline in the event of a severe energy supply disruption, a severe price increase, or another emergency affecting the Midwest.

We know now that two factors adversely affected the supply of gasoline in the Midwest, causing prices to rise. In addition to pipeline disruptions, Phase 2 of the Reformulated Gasoline—or RFG—program required the inventory of Phase 1 RFG gasoline to be purged from the supply chain. In this case, supply was interrupted at the same time that inventories were depleted. And in the Midwest in particular, sources of reformulated gasoline are few and far between, and difficult to replace when supply is interrupted. As a result, the price of reformulated gasoline spiked.

With a Midwest, Clean Air Gasoline Reserve in his arsenal, the President may have been able to combat this crisis when it presented itself, at least reducing the initial impact on consumers.

This bill will give any President an important tool with which to respond to energy supply disruptions. I would urge my colleagues to support it.

H.R. 4680—MEDICARE COVERAGE
AND PRESCRIPTION DRUGS

SPEECH OF

HON. TOM UDALL

OF NEW MEXICO

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 28, 2000

Mr. UDALL of New Mexico. Mr. Speaker, I speak today about the Democratic alternative for providing prescription coverage to all Americans on Medicare. Before I discuss the proposal I would like to tell you that we have seen great success with the Administration's long-term strategy of fiscal discipline. It is working well. Our economy is strong and we should use this moment of prosperity to lengthen the life and modernize Medicare with a prescription drug benefit plan.

Lack of prescription drug coverage among senior citizens and people with disabilities today is similar to the lack of hospital coverage among senior citizens when Medicare was created. Three out of five lack dependable coverage. Only half of beneficiaries have year-round coverage, and one third have no drug coverage at all.

It's projected that this year more than half of Medicare beneficiaries will use prescription drugs costing \$500 or more, and 38 percent will spend more than \$1000. Each year, about 85 percent of Medicare beneficiaries fill at least one prescription. Yet one third of beneficiaries have no coverage for drugs at all. And

in 1996, more than half did not have drug coverage for the entire year. In the district that I represent, there are 64,822 seniors aged 65 or older who face the challenge of paying exorbitant prices for prescription drugs.

For the 10 million Medicare beneficiaries living in rural areas, nearly half have no drug coverage. They have less access to employer based retiree health insurance because of the job structure in rural areas.

There is no reason that we in Congress cannot take the necessary steps to ensure that every older American has access to the lifesaving, life enhancing prescription drugs they need.

My Democratic colleagues and I are united in a single strategy to provide these prescription drugs. I don't know how we can deny the fact that with the funds we have, with the obligations we have, with the fact that anybody who lives to be 65 in America today has a life expectancy of 82 or 83 years that their need for life enhancing and life preserving prescription drugs will only increase. Now is the best time to address this issue. We must do it now. The timing is right.

The Republican leaders put forth a plan with a stated goal of providing affordable prescription drugs for seniors, but the policy falls far short of the promise. Their plan fails to guarantee that all seniors who want it will have access to meaningful, affordable, and reliable prescription drug coverage. Their plan also suggests a private insurance benefit that insurers, themselves, say they will not offer and no one will buy if they did offer it because it would be too expensive. Limiting direct financial assistance for prescription drugs to seniors below the \$12,500 income will leave out over half the seniors.

In contrast to the Republican proposal, we as Democrats have a sound plan for all of America's seniors. It ensures that all seniors get voluntary, affordable and reliable prescription coverage through Medicare.

Specifically under our plan, Medicare would cover half of a beneficiary's drug costs up to \$2,000 a year, beginning in 2002. That would increase to half of \$5,000 by 2009. Over that time, monthly premiums would rise from an estimated \$24 to about \$50. There would be no deductible, and no senior would pay out-of-pocket expenses of more than \$4,000 a year.

The issue of providing affordable prescription drugs for every older American is essential. Adding prescription drug coverage to Medicare is not only the right thing to do, it is the smart thing to do. It's about giving people a chance to fight for a happy and productive long life.

HONORING THE LATE PAUL
KEAHEY, JR.

HON. RALPH M. HALL

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 29, 2000

Mr. HALL of Texas. Mr. Speaker, it is an honor for me today to pay tribute to the late Paul Keahey, Jr., a native of Bonham, TX, and a long-time resident of Marshall, TX. Paul passed away in April of this year, having lived

his life in dedication to his family, his career and to his community.

I feel a kinship to Paul—and all in the Keahey family. I was born in a home built by a Keahey, and I have served as a State Senator and as a U.S. Congressman and have been privileged to get to work with Paul's mom, Florence Keahey, longtime resident of Fannin County. Paul has been an advisor and supporter—and close friend during my years of public service. I will miss him greatly.

Paul was a self-employed geologist who spent 30 years working in the oil and gas fields of East Texas. He was a member of the American Association of Petroleum Geologists, a former chairman of the Business and Economics Department at Jarvis Christian College, a member of the Marshall Historical Society, and a member of the Lighthouse United Pentecostal Church in Marshall. He was a veteran of the United States Army and a lifetime member of the National Rifle Association.

He was born April 8, 1937, in Bonham, TX, the son of Paul R. Keahey, Sr., and Florence Fogle Keahey. He is survived by his wife, Tanya of Marshall; son, Paul "Pauray" Keahey III, of Marshall; sister, Dottie Davis of Garland; uncle, Tim Bruce of Bonham; his mother; and a number of nieces and nephews.

Mr. Speaker, let us take a moment to remember and celebrate the life of Paul Keahey, a good man and good citizen who devoted his life to the area where he was born and raised and chose to live. His memory will live on in the hearts of his family and friends in East Texas.

CALLING FOR THE RELEASE OF AMERICAN CITIZEN EDMOND POPE OF GRANTS PASS

HON. GREG WALDEN

OF OREGON

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 29, 2000

Mr. WALDEN of Oregon. Mr. Speaker, I rise today to call attention to a shameful violation of international government of Russia. For three months, an American citizen named Edmond Pope of Grants Pass, Oregon, has been unjustly incarcerated in Russia for the crime of espionage. He has been denied communication with his wife of 30 years and with his parents, who are in ill health. He has been denied legal representation, access to sufficient food and medical treatment and virtually every other right we commonly associate with the justice systems of civilized nations. Indeed, Ed's imprisonment is reminiscent of what used to pass for justice under Soviet communism, when men and women were dragged from their beds in the dark of night, never to be seen again.

Mr. Speaker, Ed Pope is no spy, and he should be returned to his family immediately. We must send a strong message to the government of Russia that now is not the time to return to a system of justice in which human rights are disregarded so indiscriminately.

I urge my colleagues on both sides of the aisle to join our colleague JOHN PETERSON and me in urging the Russian government to send Mr. Pope home.

MEDICARE RX 2000 ACT

SPEECH OF

HON. BILL LUTHER

OF MINNESOTA

IN THE HOUSE OF REPRESENTATIVES

Wednesday, June 28, 2000

Mr. LUTHER. Mr. Speaker, the time is long overdue to develop a truly meaningful voluntary prescription drug benefit for our nation's seniors. But as we ensure affordable prescription drug coverage that is accessible to each and every senior in America, let us also use this opportunity to remedy the serious disparities in the current Medicare+Choice program.

Just this week, one of the remaining HMOs offering a Medicare+Choice plan in my district announced that it would no longer offer its plan. The reason it gave for its withdrawal: Minnesota's appallingly low payment rates to Medicare HMOs. Citizens in Minnesota as well as other parts of the country are today subsidizing a system that unfairly penalizes them for living in areas of the country that have historically provided low-cost and efficient healthcare services.

Many counties in our country receive such low Medicare HMO payments that seniors either have no HMO option, or receive an unacceptably inadequate benefits package. Even the seniors who have the option to enroll in a Medicare+Choice plan pay high premiums for a relatively meager benefit. At the same time seniors in other parts of the country are receiving generous benefits including prescription drugs without having to pay an extra penny towards a premium.

This issue is about fairness and the efficient delivery of health care as care costs consume an ever increasing share of our country's resources. The development of a prescription drug benefit offers us the opportunity to address and correct the current unjust disparity in the Medicare program. No more federal dollars should go to the HMOs that are already offering a plan with a rich benefits package until we achieve fairness. Instead, let's develop a genuine prescription drug benefit that ensures that all seniors have fair and equitable access to healthcare services and prescription medication. Let's develop a Medicare system that rewards efficiency, not waste. We owe this to the citizens of our country, as well as future generations of Americans.

My office and the rest of the Minnesota Congressional Delegation have filed a Congressional amicus brief on behalf of Minnesota Attorney General Mike Hatch and the Minnesota Senior Federation's lawsuit seeking to change the current unfairness in our Medicare system. I insert the brief for the record, and I ask for my colleagues' support on this important issue.

UNITED STATES DISTRICT COURT, DISTRICT OF
MINNESOTA

COURT FILE NO. 99-CV-1831 DDA/FLN

State of Minnesota, by its Attorney General, Mike Hatch; Minnesota Senior Federation—Metropolitan Region and Mary Sarno, Plaintiffs

vs.

The United States of America and Donna E. Shalala, Secretary of Health and Human Services, Defendants

STATEMENT OF INTEREST

This memorandum is respectfully submitted by the Members of the Congressional delegation of the State of Minnesota as amici curiae to support each of plaintiffs' constitutional claims. This case involves basic public health issues for senior citizens in Minnesota regarding the cost of and beneficiary access to health benefits.

The amici curiae have an interest in protecting and promoting the health, safety and welfare of their constituents, in ensuring that their constituents are not discriminatorily denied their rightful status within the federal system, and in securing the underlying incentives of the federal Medicare program for their constituents.

With this brief, the amici curiae wish to bring to the Court's attention the policy dimensions of this lawsuit. As legislators in the United States House of Representatives and Senate, the amici curiae have a unique perspective on the substance and political dynamics of the federal Medicare program. It is the hope of the amici curiae that this memorandum assists the Court in adjudicating this matter in favor of their constituents, the citizens of Minnesota. Amici urge the Court to rule in favor of Minnesota senior citizens who, by virtue of nothing else but their geographic residence, continue to suffer from the unequal and disparate treatment of the federal Medicare managed care funding scheme.

INTRODUCTION

This memorandum asserts that the current reimbursement formula for Part C of the federal Medicare Program ("Medicare+Choice") is not rationally related to the program's objective of uniformity, arbitrarily limits beneficiary options through low reimbursements for Medicare+Choice and thus violates equal protection under the law. More specifically, this memorandum asserts the following: (1) the reimbursement system of Medicare+Choice is patently irrational and does not remotely effectuate a key objective of the program; moreover, it does not promote efficiency in the health care system; (2) this irrational reimbursement system has disparate and adverse effects on the citizens of Minnesota and, consequently, has adversely and disproportionately affected their access to and enrollment in Medicare+Choice; and (3) legislative and political solutions to this irrational and unfair reimbursement system have been unsuccessful and leave no recourse but legal action before this Court.

(1) Irrationality. One of the key goals of Medicare+Choice, the roots of which stem from Congressional action in 1972 and 1982, is to furnish participating risk plans with uniform incentives to provide non-covered benefits to their beneficiaries. This goal is evident from (a) examining the initial, uniform structure and spirit of Medicare's Parts A and B, established in 1965, that are still in place today; Congress has done nothing since then to indicate a change in that spirit of uniformity; and (b) the utilization of the adjusted community rate ("ACR") mechanism